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October 6, 2022

By ECF

The Honorable Jesse M. Furman
United States District Judge
Southern District of New York
40 Foley Square
New York, N.Y. 10007

Re: *United States v. Tracii Hutsona*, 21 Cr. 299

Dear Judge Furman:

I write to respectfully request a two-month adjournment of Ms. Hutsona's sentencing hearing, currently scheduled for November 3, 2022. At the attached materials indicate, Ms. Hutsona is undergoing a 90-day treatment for long Covid and has been advised to complete the treatment before traveling to New York. The government has no objection to an adjournment.

Thank you for your consideration.

Respectfully submitted,

/s/

Deborah Colson
(917) 543-6490 (cell)

cc: AUSA Timothy Capozzi
AUSA Michael McGinnis



10117 N. 92nd St. Suite 101
Scottsdale, AZ 85258
P 480.614.5808
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www.scottsdamedcenter.com

October 3, 2022

To Whom It May Concern,

Please understand that Tracii Hutsona is currently being treated for long-hauler COVID-19. This means she has multiple medications to take daily as well as daily injections for at least the next 90 days. Therefore, this treatment plan is not conducive to travel. As an alternative for any future meetings or conferences, Tracii is better suited to participate in these via virtual teleconferences.

Thank you for your understanding.

Feel free to contact our office, Scottsdale Medical Center, with any questions you may have at 480-614-5808.

Sincerely,

A handwritten signature in black ink, appearing to read "Kathryn DiGiammarino", with a stylized flourish at the end.

Kathryn DiGiammarino, FNP-BC



FRONT LINE COVID-19 CRITICAL CARE ALLIANCE PREVENTION & TREATMENT PROTOCOLS FOR COVID-19

I-RECOVER

LONG COVID TREATMENT

An Approach to Treating Long COVID

Up to 80% of patients experience prolonged illness after COVID-19, characterized by prolonged malaise, headaches, generalized fatigue, sleep difficulties, hair loss, smell disorder, decreased appetite, painful joints, dyspnea, chest pain and cognitive dysfunction. Long COVID may persist for months after acute infection, and it is likely that patients who did not receive adequate treatment during the symptomatic phase are much more likely to develop long COVID. Treatment should be individualized to clinical signs and symptoms.

FIRST LINE THERAPIES

In order of priority; not all required.

- **Prednisone:** 10-15 mg daily for 3 weeks. Taper to 10 mg for three days, then 5 mg for three days, then stop.
- **Ivermectin:** 0.2–0.3 mg/kg daily for 2-3 weeks.
- **Low dose naltrexone (LDN):** Begin with 1 mg daily, increase to 4.5 mg daily as required. May take 2-3 months for full effect.
- **Intermittent daily fasting and/or periodic daily fasts:** (Prolonged) Fasting window 7a-7p
Fasting promotes autophagy, the body's protective mechanism to remove misfolded, foreign and damaged proteins. It also promotes mitophagy and the release of stem cells. It is likely that promoting autophagy will aid in the removal of the spike protein. NOTE: Hydroxychloroquine inhibits autophagy and should be avoided in patients undergoing intermittent fasting.
- **Spermidine and/or Resveratrol:**
These compounds have been demonstrated to augment autophagy. Wheatgerm, mushrooms, grapefruit, apples and mango are high natural sources of spermidine. A bio-enhanced formulation containing trans-resveratrol from Japanese Knotwood Root appears to have good bio-availability.
- **Melatonin:** 8 mg at night (slow release/extended release preferred).
Patients should pay attention to good sleep habits. Increase dose from 1 mg as tolerated (may cause severe bad dreams at high dosages).
- **Vitamin D:**
The majority of those with long COVID continue to have Vitamin D deficiency. Patients may require a loading dose based on baseline Vitamin D levels (see Table 2). If baseline levels are unknown, the needed dose can be calculated from body weight or BMI (see Table 3).
- **Omega-3 fatty acids:** Vascepa, Lovaza or DHA/EPA 4 g day.
- **Aspirin:** 81 mg daily.
- **Curcumin (turmeric):** 500 mg twice daily.

SECOND LINE THERAPIES

About this

The information in this document is for informational purposes only and is not intended to be used as a substitute for medical advice from a healthcare provider. COVID-19 is a rapidly changing disease and the best (and most) treatment options are still being determined.

It is important to consult with your healthcare provider to health and safety. The world is still in the early stages of the COVID-19 pandemic and the treatment options are still being determined. Patient consultation is recommended before any treatment.

New information is added to this document as it becomes available. The document is not intended to be used as a substitute for medical advice from a healthcare provider. The information is for informational purposes only and is not intended to be used as a substitute for medical advice from a healthcare provider.

For more information, please visit the FLCCC website at www.flccc.org.

2 fatty acids and LDN and add second line

Patient Care Summary for Tracii Hutsona

Most Recent Encounter

09/23/2022 Kathryn E Digiammarino: 10117 N 92nd Street, Suite 101, Scottsdale, AZ 85258-4555, Ph. tel:+1-480-614580

Reason for Visit

Telemedicine

Assessment and Plan

The following list includes any diagnoses that were discussed at your visit.

1. Chronic cough
 - promethazine-DM 6.25 mg-15 mg/5 mL oral syrup

2. History of SARS-CoV-2

Discussion Note: None recorded.

Patient educational handouts: No information available.

Plan of Care

| Reminders | Provider |
|--------------|----------------|
| Appointments | None recorded. |
| Lab | None recorded. |
| Referral | None recorded. |
| Procedures | None recorded. |
| Surgeries | None recorded. |
| Imaging | None recorded. |

Current Medications

Your medical record indicates you are on the following medicine. If this list is not consistent with the medications you are currently taking, or if you are taking additional over-the-counter medicines, please inform your provider.

| Name | Prescribed Date | Start Date |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------|
| albuterol sulfate HFA 90 mcg/actuation aerosol inhaler INHALE 1-2 PUFFS EVERY 4 HOURS AS NEEDED FOR COUGH, SHORTNESS OF BREATH, OR WHEEZING | | |
| benzonatate 100 mg capsule TAKE 1-2 CAPSULE BY MOUTH EVERY 8 HOURS AS NEEDED FOR COUGH | | |
| prednisone 20 mg tablet TAKE 2 TABS BY MOUTH DAILY FOR 5 DAYS | | |
| promethazine-DM 6.25 mg-15 mg/5 mL oral syrup Take 5 mL every 4 hours by oral route for 7 days. | 09/23/2022 | |

Home

Medications

Sign Out

IMPORTANT:



Questions for your
provider? Need an
appt. or Rx refill?

Send a Message

Promethazine-Dm 6.25 Mg-15 Mg/5
ML Oral Syrup >

Albuterol Sulfate Hfa 90
McG/Actuation Aerosol Inhaler >

Prednisone 20 Mg Tablet >

Benzonatate 100 Mg Capsule >

Viewing Tracii Hutsona

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